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Before the  
Federal Communications Commission  
Washington, D.C. 20554

FEDERAL COMMUNICATIONS COMMISSION  
OFFICE OF SECRETARY

FCC 96J-3

In the Matter Of )  
 )  
Federal-State Joint Board on )  
Universal Service Recommended )  
Decision )

CC Docket No. 96-45

**Reply Comments of the  
Rural Utilities Service**

**Introduction**

The Rural Utilities Service (RUS) has surveyed its telemedicine grant recipients to collect information requested by the Federal Communications Commission (FCC) staff to assist in implementing Section 254(h)(1)(A) of the Telecommunications Act of 1996. The results of that survey are presented hereafter, with a brief RUS analysis of those results.

In addition, RUS provides correction of its December 19, 1996, comments, and a clarification of those comments.

**The Rural Telemedicine Survey**

Using a survey instrument developed by the FCC in cooperation with RUS and other federal agencies, RUS sought information from all 45 of the telemedicine grant recipients reaching back to the program inception in 1993. Twenty-six of the grant recipients responded, for a response rate of 58 percent. Useful telecommunications data was received on 141 rural telemedicine sites. Three respondents reported telemedicine applications that are currently under construction. A copy of the 26 completed surveys is attached to these Reply Comments.

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The 26 respondents reported telecommunications bit rate usage as follows:

<u>Service Used</u>	<u>Number of Respondents</u>	<u>Percentage of Total</u>
Full T1	11	42%
1/2 T1	1	4%
1/4 T1	8	31%
ISDN (144KB)	2	8%
POTS	4	15%

Although the survey did not specifically ask why telemedicine providers chose the speeds they use, providers offered reasons. Of the 15 respondents who buy less than the T1 rate, eight volunteered that they did not choose a higher rate because of high cost, and one cited facility unavailability as the reason. Clearly, cost is the main deterrent.

Of those telemedicine providers using T1 facilities, only one out of 11 respondents stated that they could use a lower rate service without degrading the telemedicine services offered.

The survey indicates that telemedicine may be ready to move to a communications bit rate higher than T1. Of the 11 users of T1 service, seven, or 64%, cited additional advantages of using an even higher bit rate. Three respondents reported telemedicine applications that are under construction, and of these new applications, one is contemplating a DS-3 network.

Respondents reported many advantages of higher rate circuits. Carla A. Anderson of the Dakota Telemedicine System wrote "[t]he better the resolution, the better the utilization of telemedicine." Ken Brown of the Tri-County Memorial Hospital, Whitehall, WI, wrote that "[b]etter clarity of the video image and faster speed = better consultation/diagnosis."

Eight respondents reported distance charges for rural circuits, and examination of the monthly charge rates for other respondents showed that most paid premiums for distance that were embedded in their fixed monthly rates. In addition, one respondent reported that the state government had negotiated its telecommunications costs with providers, and one respondent was an insular telemedicine project with all service (which was POTS) provided over satellite.

Twelve of 22 respondents reported having access to internet at their rural sites. Of those 12, three reported paying long distance charges to reach that point of access.

### **Correction of December 19, 1996 Comments**

On page two of the December 19 Comments, RUS states that:

“The 900 rural telecommunications carriers that RUS finances receive over 50 percent of their gross revenue from interexchange access charges.”

This should read:

“The 900 rural telecommunications carriers that RUS finances receive *on average* over 50 percent of their gross revenue from interexchange access charges.”

On page three of the December 19 Comments, in the last paragraph, the third sentence reads:

“The percentage mentioned above could even be a variable set by the states or the USS Administrator in consideration of the quality and reliability of service the carrier provides.”

This should read:

“The *investment level* mentioned above could even be a variable set by the states or the USS Administrator in consideration of the quality and reliability of service the carrier provides.”

### **Clarification of December 19, 1996 Comments**

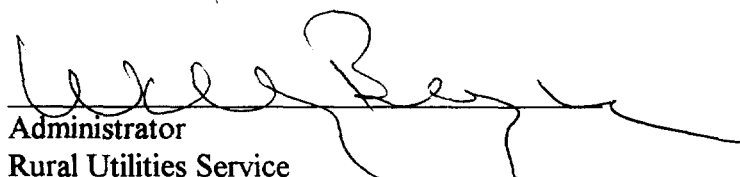
On page three of the December 19 Comments, RUS stated that the FCC should ensure that universal service support payments tie receipt of support to investment in infrastructure. RUS noted that various segments of the local exchange carrier (LEC) industry have been criticized by different parties for either investing too much or too little in rural infrastructure. Although it is implicit in RUS Comments, RUS wants to be explicit that it is RUS' position that there has not been too much investment in rural infrastructure and more investment will be needed by all rural telecommunications providers to meet the promise of the Telecommunications Act. The point RUS made in that section of the Comment is that any new support system needs to ensure that any support paid actually gets invested in rural infrastructure.

**Conclusion**

The Rural Utilities Service is pleased to provide survey results to the FCC to help in implementation of Universal Service Support for rural telemedicine. The survey shows that the T1 rate suggested for support by the Joint Board is the rate used by more rural telemedicine providers than any other, that there is migration to higher rates, and that cost is the main barrier to higher bit rate usage and greater success of telemedicine applications.

Dated:

1/9/97

  
\_\_\_\_\_  
Administrator  
Rural Utilities Service

Attachment



Fax Transmittal

## Regional Programs

Area Health Education Centers Program

Rural Hospital Program

Delta Health Education Center Program

Telemedicine Program

University of Arkansas for Medical Sciences

1123 South University Avenue - Suite 813

Little Rock, AR 72204

(501) 686-2590 (voice) (501) 686-2585 (fax)

Date 12-12-96 Cover page plus 5 pages transmitted

To PAM BENNETT

Organization RURAL UTILITIES SERVICE

Fax (202) 205-2921 Voice \_\_\_\_\_

From DR. ANN BYNUM

Message

# TELEMEDICINE USER SURVEY

1. Name of project:

ARKANSAS Rural MedLink

2. Please list each of the project's sites:

Name of Site:

State in which it is located:

<u>Bralley County Hospital</u>	<u>Warren, Arkansas</u>
<u>Stone County Medical Center</u>	<u>Mt View, Arkansas</u>
<u>Van Buren County Memorial Hospital</u>	<u>Clinton, Arkansas</u>
<u>Fulton County Hospital</u>	<u>Salem, Arkansas</u>
<u>Cross County Hospital</u>	<u>Lynne, Arkansas</u>

Please answer the following questions for each of your sites. Use additional sheets if necessary.

3. What is the nearest city of population equal to or greater than 50,000 in your state, and approximately how far are you from its boundary?

City: Warren Distance from city boundary: 50 mi Pine Bluff

4. Name of the project's telecommunications service provider:

Southwestern BELL

5. Level of telecommunications service the project is currently using: (For example: voice grade, 144 Kbps (ISDN), 384 Kbps, T-1 or equivalent, or higher rate)

384 Kbps (1/4 of T-1)

6. Charges for telecommunications service:

Is there a monthly charge? No Yes ☒  
If yes, how much is the charge? \$549.<sup>00</sup> /MO

2. Stone County Medical Center

City: Mt. View      Distance from City Boundary: 100 Mi <sup>Little</sup> <sub>Rock</sub>

Service Provider: Mt View Telephone Company

Charges Mt View: \$ 1500.00 / month

3. Van Buren County Memorial Hospital

City: Clinton, AR      Distance: 65 Mi <sup>Little</sup> <sub>Rock</sub>

Service Provider: Northern Arkansas Telephone Co.

Charges Clinton: \$ ~~1700~~ \$1700 / month

4. Fulton County Hospital

City: Salem      Distance from City Boundary: 80 Mi.

Service Provider: Century Telephone Company

Charges Salem: \$ 1200.00 / mo

5. Cross County Hospital

City: Wynne, AR      Distance from City Boundary: 50 Mi <sup>Memphis</sup>

Service Provider: Southwestern Bell

Charges Wynne: \$ 549.00 / mo

Is there a usage-based charge? No ☒ Yes ☐

If yes, how much is the charge? \_\_\_\_\_

Is there a distance component (such as a per-mile fee) of the charge?

No ☐ Yes ☐

If yes, how much is the charge? \_\_\_\_\_

Was there an installation fee? No ☐ Yes ☒

If yes, how much is the charge? \$6,500 includes warranty & installation

Is the charge the regular tariffed rate, or is there a discount from the telecommunications provider? Tariffed ☐ Discount ☒

If there is a discount, how much is it? 30%

7. How does the project use telecommunications in the delivery of health care? (For example - to send x-rays, distribute public health information, or perform video consultations. Please identify any occasional or episodic uses, such as might result from an outbreak of disease.)

Continuing Education and Staff Development for Rural Health care Providers  
Consumer Health Education classes (Public)  
Administrative Video Conferencing  
Credit Classes for Rural Population - BS - Medical - Graduate  
Clinical consultations  
Emergency Room consultations  
Specialty machine clinics  
Health education for K-12

8. Could the project provide the services it is currently providing with less bandwidth? What effect would a lesser level of bandwidth have? (The implications of using greater or lesser levels of telecommunications services are related to image transmission time. What would be the impact if the health care activities for which you now use telecommunications took twice as long, or if they could be completed in half the time?)

We need the bandwidth we are now using  
for clinical work & electronic diagnostic equipment.



9. What would the implications of having a greater level of bandwidth be?

Greater Patient & User Satisfaction  
↑ Use

10. Do you have e-mail? No ☒ Yes ☒

11. Do you have Internet access? No ☐ Yes ☒

If yes, do you incur long-distance charges by using it?

No ☐ Yes ☒

Please estimate your number of hours of internet use per month:

\_\_\_\_\_

12. If you have access to the Internet, please list any purposes other than e-mail (such as accessing databases such as Lexis/Nexis)? for which you use it:

Medical updates  
Research  
Grant updates  
Library users



#2

## TELEMEDICINE USER SURVEY

## 1. Name of project:

NORTH IDAHO COMMUNITY EDUCATION AND  
HEALTH INFORMATION NETWORK

## 2. Please list each of the project's sites:

Name of Site:

State in which it is located:

<u>KOOTENAI MEDICAL CENTER</u>	<u>IDAHO</u>
<u>NORTH IDAHO COLLEGE</u>	<u>"</u>
<u>BOUNDARY COMMUNITY HOSPITAL</u>	<u>"</u>
<u>BOJNER GENERAL HOSPITAL</u>	<u>"</u>
<u>SHOSHONE MEDICAL CENTER</u>	<u>"</u>
<u>BENEWAH COMMUNITY HOSPITAL</u>	<u>"</u>

Please answer the following questions for each of your sites. Use additional sheets if necessary.

ALL SITES USE SAME PROVIDER, HAVE SAME  
TARIFF RATE

3. What is the nearest city of population equal to or greater than 50,000 in your state, and approximately how far are you from its boundary?

City: BOISEDistance from city boundary: 350 - 495 mi

## 4. Name of the project's telecommunications service provider:

AT&T

5. Level of telecommunications service the project is currently using: (For example: voice grade, 144 Kbps (ISDN), 384 Kbps, T-1 or equivalent, or higher rate)

PRI-T1 installed - we use 384K for video  
consults

## 6. Charges for telecommunications service:

Is there a monthly charge? No

Yes ☒

If yes, how much is the charge?

\$350 per site for access to PRI-T1

Is there a usage-based charge? No

Yes ☒

If yes, how much is the charge?

Eg. 7/1135/hr for 1 point to point consult, \$22.50 for a three-way multi-point conference.

Is there a distance component (such as a per-mile fee) of the charge?

No ☒ Yes

If yes, how much is the charge?

Was there an installation fee? No ☒ Yes

If yes, how much is the charge?

Is the charge the regular tariffed rate, or is there a discount from the telecommunications provider? Tariffed Discount ☒

If there is a discount, how much is it?

Discount was negotiated by the Idaho State Department of Administration - Educational Services

How does the project use telecommunications in the delivery of health care? (For example - to send x-rays, distribute public health information, or perform video consultations. Please identify any occasional or episodic uses, such as might result from an outbreak of disease.)

VIDEO CONSULTATIONS - Public Health Forums - HEALTH NETWORK BUSINESS MEETINGS - Continuing Medical Education Courses - Allied Health and Nursing Education

8. Could the project provide the services it is currently providing with less bandwidth? What effect would a lower level of bandwidth have? (The implications of using greater or lesser levels of telecommunications services are related to image transmission time. What would be the impact if the health care activities for which you now use telecommunications took twice as long, or if they could be completed in half the time?)

384K (1/4 T-1) is the minimum acceptable bandwidth for our INTERACTIVE VIDEO NETWORK - lower bandwidth would not transmit diagnostic quality images.

9. What would the implications of having a greater level of bandwidth be?

GREATER BANDWIDTH WOULD REDUCE TRANSMISSION  
TIMES & IMPROVE IMAGE QUALITY SOMEWHAT -  
COMPRESSION ALLOWS FOR NEAR FULL-MOTION  
OVER 384K -

10. Do you have e-mail? No \_\_\_\_\_ Yes ☒

11. Do you have Internet access? No \_\_\_\_\_ Yes ☒

If yes, do you incur long-distance charges by using it?

No ☒ Yes \_\_\_\_\_

Please estimate your number of hours of internet use per month:

175<sup>+</sup>

12. If you have access to the Internet, please list any purposes other than e-mail (such as accessing databases such as Lexis/Nexis)? for which you use it:

ACCESS TO FEDERAL REGISTER, LIBRARY OF CONGRESS,  
NAD LIBRARY OF MEDICINE, NAD AB LIBRARY,  
STATE OF IDAHO STATUTES & CODES, COMMERCIAL  
DOCUMENT SUPPLIERS, GRANT INFORMATION, ACCESS TO  
LEGISLATORS & THEIR AIDES, LOCAL LIBRARY CATALOGS,  
LOCALLY MOUNTED CD DATABASES, LOCAL COMMUNITY  
NETWORK FOR SERVICE PROVIDERS

12/13/96

16:13

8612 964 2941

ARLINGTON HOSP.

001

#3



# Arlington Municipal Hospital

## FAX COVER LETTER

NAME Glenda Martin

LOCATION USDA / RUS

PHONE (202) 720 - 0721

FAX NUMBER (202) 205 - 2921

FROM/OFFICE Lynette Froehlich

FAX NUMBER (507) 964-2941

NAME OF DOCUMENT \_\_\_\_\_

OTHER INFORMATION \_\_\_\_\_

DATE 12/13/96 TIME 4:15 pm

NUMBER OF PAGES 4 INCLUDING COVER LETTER

\*\*\*\*\*

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Release authorized by Lynette Froehlich  
by phone on 1/8/97.

Ed Cameron

12/13/96 18:13

612 964 2941

ARLINGTON HOSP.

002

FROM : USDA RUS

2022052921

1996, 12-12

10:25

#401 P.03/07

**TELEMEDICINE USER SURVEY****1. Name of project:**Arlington Municipal Hospital Tele-medicine**2. Please list each of the project's sites:****Name of Site:****State in which it is located:**Arlington Municipal HospitalMinnesotaAbbott-Northwestern HospitalMinnesota

Please answer the following questions for each of your sites. Use additional sheets if necessary.

**3. What is the nearest city of population equal to or greater than 50,000 in your state, and approximately how far are you from its boundary?**City: MinneapolisDistance from city boundary: 50 miles**4. Name of the project's telecommunications service provider:**U.S. West (94%) and Frontier (Local Co.) (6%)**5. Level of telecommunications service the project is currently using: (For example: voice grade, 144 Kbps (ISDN), 384 Kbps, T-1 or equivalent, or higher rate)**T-1 (768 bandwidth)**6. Charges for telecommunications service:**

Is there a monthly charge? No \_\_\_\_\_ Yes X  
If yes, how much is the charge? \$866.00/\$361.00

Is there a usage-based charge? No ☒ Yes \_\_\_\_\_  
If yes, how much is the charge? \_\_\_\_\_

Is there a distance component (such as a per-mile fee) of the charge?

No \_\_\_\_\_ Yes ☒

If yes, how much is the charge? 47 miles \$18.42

Was there an installation fee? No \_\_\_\_\_ Yes ☒

If yes, how much is the charge? \$2690

Is the charge the regular tariffed rate, or is there a discount from the telecommunications provider? Tariffed ☒ Discount ☒ per length of contract (contract 36 months)

If there is a discount, how much is it? \_\_\_\_\_

7. How does the project use telecommunications in the delivery of health care? (For example -- to send x-rays, distribute public health information, or perform video consultations. Please identify any occasional or episodic uses, such as might result from an outbreak of disease.)

Provides Emergency Room coverage - see E.R. patients, send X-rays, EKG's  
and lab values.

Educational programs for all professions.

Administrative meetings.

Commitment (Psych) hearings.

Public education programming.

Physician consultations.

8. Could the project provide the services it is currently providing with less bandwidth? What effect would a lesser level of bandwidth have? (The implications of using greater or lesser levels of telecommunications services are related to image transmission time. What would be the impact if the health care activities for which you now use telecommunications took twice as long, or if they could be completed in half the time?)

Yes. Instead of 768 bandwidth, could use a 384 bandwidth minimum level.

Felt the 768 bandwidth to allow better diagnosis of X-rays for image  
visualization.

Need for video-conferencing.

12/13/96 16:14

612 964 2941

ARLINGTON HOSP.

004

FROM : USDA RUS

2022062921

1996.12-12

10:26

#401 P.05/07

9. What would the implications of having a greater level of bandwidth be?

Better visual resolution.

10. Do you have e-mail? No ☒ Yes \_\_\_\_\_

11. Do you have Internet access? No ☒ Yes \_\_\_\_\_

(Local phone company does not offer)

If yes, do you incur long-distance charges by using it?

No \_\_\_\_\_ Yes \_\_\_\_\_

Please estimate your number of hours of internet use per month:

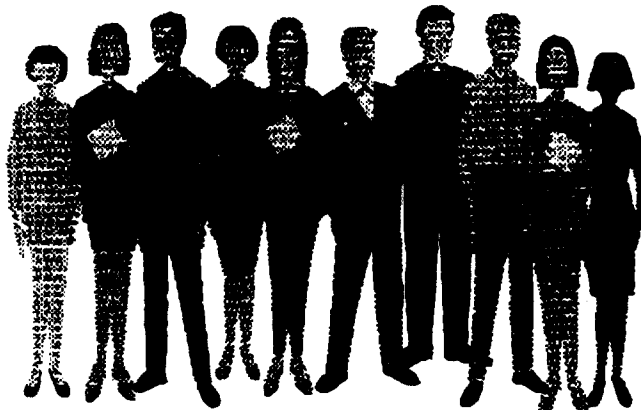
12. If you have access to the Internet, please list any purposes other than e-mail (such as accessing databases such as Lexis/Nexis)? for which you use it:





#4

## ST. FRANCIS MEDICAL CENTER SUBSIDIARIES AND AFFILIATE SERVICES



TO: Orren E. Cameron, III DATE: 12/13/96

FAX NUMBER: 202-720-4099

FROM: William P. Gunther, Provider Network Coordinator

FAX NUMBER: (318) 327-4749

TELEPHONE NUMBER: (318) 327-7297

PAGES FAXED: 4

MESSAGES: Mr. Cameron,  
Please find attached the completed FCC questionnaire  
for the Northeast Louisiana Health Network, Inc.

## TELEMEDICINE USER SURVEY

## 1. Name of project:

Northeast Louisiana Health Network Teleradiology Link

## 2. Please list each of the project's sites:

Name of Site:

State in which it is located:

Columbia Medical Center	Louisiana
West Carroll Memorial	Louisiana
Jackson Point Hospital	Louisiana
Madison Parish Hospital	Louisiana
Richardson Medical Center	Louisiana
St. Francis Medical Center	Louisiana
Morehouse General Hospital	Louisiana
Franklin Medical Center	Louisiana

Please answer the following questions for each of your sites. Use additional sheets if necessary.

## 3. What is the nearest city of population equal to or greater than 50,000 in your state, and approximately how far are you from its boundary?

City: Monroe, LA Distance from city boundary: All within 75 miles

## 4. Name of the project's telecommunications service provider:

Bell South

## 5. Level of telecommunications service the project is currently using: (For example: voice grade, 144 Kbps (ISDN), 384 Kbps, T-1 or equivalent, or higher rate)

T-1 Frame Relay

## 6. Charges for telecommunications service:

Is there a monthly charge? No \_\_\_\_\_ Yes X

If yes, how much is the charge? \_\_\_\_\_ \$733.00

Is there a usage-based charge? No ☒ Yes \_\_\_\_\_

If yes, how much is the charge? \_\_\_\_\_

Is there a distance component (such as a per-mile fee) of the charge?

No \_\_\_\_\_ Yes ☒ \_\_\_\_\_

If yes, how much is the charge? Charge is based on distance from point to point

Was there an installation fee? No \_\_\_\_\_ Yes ☒ \_\_\_\_\_

If yes, how much is the charge? \$3,600.00

Is the charge the regular tariffed rate, or is there a discount from the telecommunications provider? Tariffed ☒ Discount \_\_\_\_\_

If there is a discount, how much is it? \_\_\_\_\_

7. How does the project use telecommunications in the delivery of health care? (For example -- to send x-rays, distribute public health information, or perform video consultations. Please identify any occasional or episodic uses, such as might result from an outbreak of disease.)

Project's primary focus is the transmission of Medical X-ray's  
from a rural primary care provider to a Tertiary Medical Center  
for consultation and/or final medical interpretation.

8. Could the project provide the services it is currently providing with less bandwidth? What effect would a lesser level of bandwidth have? (The implications of using greater or lesser levels of telecommunications services are related to image transmission time. What would be the impact if the health care activities for which you now use telecommunications took twice as long, or if they could be completed in half the time?)

Yes, The lower bandwidth would mean slower Image transmission  
and possible image degradation.

9. What would the implications of having a greater level of bandwidth be?

Faster transmission of the medical image

10. Do you have e-mail? No ☒ Yes ☐

11. Do you have Internet access? No ☒ Yes ☐

If yes, do you incur long-distance charges by using it?

No ☐ Yes ☐

Please estimate your number of hours of internet use per month:

12. If you have access to the Internet, please list any purposes other than e-mail (such as accessing databases such as Lexis/Nexis)? for which you use it:

#5

DEACONESS-BILLINGS CLINIC  
HEALTH SYSTEM**FAX**

Date

12/16/96

Number of pages including cover sheet

2

TO:

Orren E. Cameron III  
Rural Utilities ServiceDonna Hemmick  
Good Samaritan Hosp. Fund.

Phone

Fax Phone

202-720-4099

308-865-2933

CC:

FROM:

Thelma M. Closhy Armstrong  
Eastern Montana  
Telemedicine Network

Marketing and Regional Services

2800 Tenth Avenue North

P.O. Box 37000

Billings, Montana 59107

Phone

(406) 255-8425

Fax Phone

(406) 255-8405

REMARKS:

☐

Urgent



For your review

☐

Reply ASAP

☐

Please Comment

Thelma McClosky Armstrong authorized  
release of this information by telephone call  
on 1/8/97. Ed Cameron, RUS

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**Program Office**

Deaconess Medical Center  
2800 Tenth Avenue North  
Billings, Montana 59101  
Ph. (406) 657-4870  
Ph. (800) 325-1774  
Fax (406) 657-4875

**Participating Sites**

Behavioral Health Clinic  
Billings, Montana  
(406) 255-8550

Colstrip Medical Center  
Colstrip, Montana  
(406) 748-3600

Community Memorial Hospital  
Sidney, Montana  
(406) 482-2120

Eastern Montana Community  
Mental Health Center  
Miles City, Montana  
(406) 332-0234

Fallon Medical Center  
Baker, Montana  
(406) 778-3331

Frances Mahon Deaconess  
Hospital  
Glasgow, Montana  
(406) 228-4351

Glendive Medical Center  
Glendive, Montana  
(406) 365-3306

Montana Hospital  
Association  
Helena, Montana  
(406) 442-1911

Roosevelt Memorial Hospital  
& Nursing Home  
Culbertson, Montana  
(406) 787-6281

## EASTERN MONTANA TELEMEDICINE NETWORK

1. **Project Name:** Eastern Montana Telemedicine Network

2. **Name of Sites:**

Deaconess Billings Clinic Health System  
Deaconess Behavioral Health Center  
Eastern Montana Community Mental Health Center  
Glendive Medical Center  
Sidney Health Center  
Fallon Medical Complex  
Colstrip Medical Center  
Roosevelt Memorial Hospital  
Frances Mahon Deaconess Hospital  
Montana Hospital Association

Questions 3 - 6

Please refer to attached spread sheet

7. **How does the project use telecommunications in the delivery of health care?**

The Eastern Montana Telemedicine Network is an interactive videoconferencing network that provides medical and mental health consultation services, continuing medical and higher education, administrative and telebusiness services throughout eastern Montana. Medical consultation can be provided by a full array of specialist including 24 hour a day access to the Deaconess Billings Clinic Health Systems Emergency Department.

8. **Could the Project provide the services it is currently providing with less Bandwidth?**

**Absolutely Not.** When the EMTN designed its network, we made some very difficult decision based on the economic realities of telecommunication costs. We are using the **MINIMUM** acceptable bandwidth. For many of our consultative activities such as pathology, speech pathology and neurology full T-1 service would enable us to maximize the quality of the diagnostic information received by our consultants.

9. **What would the implication of having a greater level of bandwidth be?**

As stated above, better quality of diagnostic imaging and live transmission thereby improving the diagnostic capabilities of our health care providers.

10. **Do you have e-mail?**

At the present time none of the EMTN sites except the Montana Hospital Association (MHA) and the Network hub at Deaconess Billings Clinic Health System (DBCHS) have E-Mail.

11. **Internet Access?**

All sites have access to the internet but would pay a long distance charge for those services.

DBCHS and the MHA do not pay long distance rates for internet.

# Eastern Montana Telemedicine Network

Sites	Mileage	Carrier	Service	Monthly Costs	Usage	Install	Per mile Fee/Fixed Portion	Discounted
Behavioral Health	0	US West	384 kbps	\$200.00	n/a	\$ 1,200.00	\$12.04 per mile/\$104.00	Tariffed
Billings	0	US West	384 kbps	\$ 1,945.40	n/a	\$ 1,200.00	\$12.04 per mile/\$104.00	Tariffed
Colstrip	120	US West	384 kbps	\$ 934.04	n/a	\$ 1,200.00	\$12.04 per mile/\$104.00	Tariffed
Glendive	222	US West	384 kbps	\$ 1,186.66	n/a	\$ 1,200.00	\$12.04 per mile/\$104.00	Tariffed
Sidney	272	US West	384 kbps	\$ 922.00	n/a	\$ 1,200.00	\$12.04 per mile/\$104.00	Tariffed
Culbertson	309	US West	384 kbps	\$ 472.77	n/a	\$ 1,200.00	\$14.99 per mile/\$196.00	Tariffed
		Nemont		582.28				15%
Billings Dial-up		AT&T	384 kbps	486.92	\$36 per hr	\$ 600.00		36%
Helena Dial-up	*89	AT&T	384 kbps	486.92	\$36 per hr	\$ 600.00		36%
Glasgow	279	Nemont	384 kbps	815.67	n/a	\$ 1,200.00	\$15.06 per mile	15%
		Valley		815.67				15%
Baker	225	M-rivers	384 kbps	\$ 600.00	n/a	\$ 850.00		50%
		US West		\$ 167.73			\$14.99 per mile/\$196.00	Tariffed
				\$ 9,616.06		\$ 10,450.00		

Note - closest town of 50,000 to all EMTN sites is Billings

\*except Helena which is closer to Great Falls

#6

TELEMEDICINE USER SURVEY

1. Name of project: DECATUR COUNTY HOSPITAL  
LEON, IA 515-446-4242  
HEALTHNET WORKS

2. Please list each of the project's sites:

Name of Site:

State in which it is located:

CARSTON N.S.	IA	CANADOTTA N.S.	MO
CARSTON HOSPITAL	"	COMST CITY N.S.	MO
CELEST N.S.	"	CELESTON N.S.	"
CELEST HOSPITAL	"	CELESTON N.S.	"
CHARITON HOSPITAL	"	CHARITON N.S.	"
MURRAY N.S.	"	MURRAY N.S.	"
KIRKSVILLE N.S.	MO	PRINCETON N.S.	"

Please answer the following questions for each of your sites. Use additional sheets if necessary.

3. What is the nearest city of population equal to or greater than 50,000 in your state, and approximately how far are you from its boundary?

City: DES MOINES Distance from city boundary: 60 MI

4. Name of the project's telecommunications service provider:

GRAND RIVER MUTUAL TO ICN (Grand Communications Network)

5. Level of telecommunications service the project is currently using: (For example: voice grade, 144 Kbps (ISDN), 384 Kbps, T-1 or equivalent, or higher rate)

DS-1 & DS-3 QUOTED

6. Charges for telecommunications service:

Is there a monthly charge? No Yes X  
If yes, how much is the charge? FIRST QUOTE DS-1 807.50 @ 400  
DS-3 7127.28 @ 400  
+ CONSTRUCTION COSTS ON DS-3



FROM :

PHONE NO. :

Feb. 01 1996 10:54PM P3

FROM : USDA RUS

2022052321

1996.12-12

10:17

1400 P.04/07

Is there a usage-based charge? No

Yes ☒

If yes, how much is the charge? \$5.00

~~UNKNOWN~~ UNKNOWN for NON  
ICD - ICD STATE SUBSIDY

Is there a distance component (such as a per-mile fee) of the charge?

No

Yes

If yes, how much is the charge?

UNKNOWN

Was there an installation fee? No

Yes ☒

If yes, how much is the charge?

1096 DS-3

~~546 DS-1~~

Is the charge the regular tariffed rate, or is there a discount from the telecommunications provider? Tariffed

Discount

If there is a discount, how much is it?

UNKNOWN

7. How does the project use telecommunications in the delivery of health care? (For example -- to send x-rays, distribute public health information, or perform video consultations. Please identify any occasional or episodic uses, such as might result from an outbreak of disease.)

VIDEO CONSULTATIONS FOR MEDICINE  
PILOT DATA DOING GROUP THERAPY  
BETWEEN 4 REMOTE SITES - 10 STUDENTS  
IN EACH SITE

WILL BEGIN DOING PARENT GROUPS FOR  
BEHAVIOR DISORDER TEENS

8. Could the project provide the services it is currently providing with less bandwidth? What effect would a lesser level of bandwidth have? (The implications of using greater or lesser levels of telecommunications services are related to image transmission time. What would be the impact if the health care activities for which you now use telecommunications took twice as long, or if they could be completed in half the time?)

MUST HAVE IMMEDIATE VOICE & VIDEO  
SYNCHRONIZATION TO MAKE GROUP  
PROCESS WORK